

Local Education Agency (LEA)
Ad Hoc Workgroup
January 5, 2005 Meeting Summary

Location: Sacramento City Unified School District

ATTENDEES:

Name	Organization/Title
1. Elizabeth Touhey	DHS, Section Chief, Medi-Cal Benefits Branch, Co-Chair
2. Pam Wagner	Los Angeles Unified School District (LAUSD), Co-Chair
3. Barbara Schultz	DHS, Medi-Cal Benefits Branch
4. David Bass	DHS, Medi-Cal Benefits Branch
5. Linda Davis-Aldritt	California Department of Education
6. John DiCecco	LAUSD
7. Cathy Bennett	Sacramento City USD
8. Susan Hamblin	Stanislaus COE
9. Susan Bier	Konocti USD
10. Greg Englar	Sonoma COE
11. Laura Baynham	Mendocino COE
12. Rudolph Ramirez	Fresno USD
13. Barbara Miller	Fresno USD
14. Judy Dorn	Fresno COE
15. Robert Powell	California Speech and Hearing Association
16. Kevin Harris	Navigant Consulting, Inc.
17. Bisim Lee	Navigant Consulting, Inc.
18. Gloria Eng	Navigant Consulting, Inc.

Handouts

Each participant received a folder with copies of the following: Agenda, LEA Workgroup Meeting Summary for November 3, 2004, Senate Bill 231 Implementation Project Status Reports (January 2004 – September 2004), Implementation of New National Codes: Additional Claims Information Required, LEA Provider Manual Preliminary Draft: Proposed Organization, Screenshot of the Provider Manual Page of the LEA Website, Behavioral Aide Questionnaire, and Navigant Consulting's PowerPoint presentation. Copies of the Updated Summary of Transportation Regulations, Summary of Personal Care Regulations, and Summary of Behavioral Intervention Regulations were also distributed.

Purpose

The meeting was convened by DHS in partnership with LAUSD. The purpose of the Workgroup is to improve the LEA Program. The emphasis of the meeting is to strategize various goals and activities aimed at enhancing Medi-Cal services provided on school sites and access by students to these services, while increasing federal reimbursement to LEAs for the cost of providing these services.

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Speech-Language Equivalency

CMS recently agreed with the state's position that the educational and work experience requirements of the Services Credential with Specialization in Clinical or Rehabilitative Services (CRS credential) issued by the California Commission on Teacher Credentialing are equivalent to federal requirements for speech pathologists. Speech-language practitioners who hold the CRS credential will not have to be supervised by licensed speech pathologists. The decision does not cover credentialed audiologists. The Workgroup recommended that practitioner qualifications in the LEA Provider Manual be modified to reflect the change in supervision requirements. Practitioner qualifications should also be revised to reflect that an audiologist must be licensed and credentialed to provide services in the LEA Program.

Action:

What: Submit a SPA to remove supervision requirements for credentialed speech-language practitioners who hold a CRS credential.

Who: DHS

When: Immediately after CMS makes a decision regarding SPA 03-024

Data Match System

DHS asked Information Technology Systems Division (ITSD) to add all valid aid codes for the LEA Program to the Medi-Cal Eligibility Data System, which is used in data match processing. ITSD will complete this work by the end of February or March. In the meantime, LEA providers may submit claims for students that they know are Medi-Cal eligible, such as foster care and adopted children, if they have their Medi-Cal recipient numbers. As new Medi-Cal aid codes are established, DHS will be notified by ITSD to identify codes that are valid for the LEA Program.

SPA 03-024

DHS re-submitted SPA 03-024 to CMS on December 16, 2004. CMS has 90 days to approve or disapprove the SPA; the 90th day is March 16, 2005.

Action:

What: Notify the Workgroup by e-mail of CMS' decision regarding SPA 03-024.

Who: DHS

When: After DHS receives notification from CMS

Implementation of SPA 03-024

DHS and Navigant Consulting drafted a System Design Notice (SDN) that contains instructions regarding the changes required to implement SPA 03-024 for Payment System Division (PSD) and EDS. The SDN requests that changes to the claims processing system be initiated prior to SPA approval with an effective implementation

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date no later than 90 days after SPA approval. The Workgroup expressed the need for expediting the implementation process. If reimbursement from updated rates is not received before the end of the fiscal year, personnel who provide health services for children and families will be laid off. The impact on LEAs will be substantial, since re-hiring of personnel is difficult.

New national billing codes reflecting updated rates will be implemented by EDS after SPA approval and will generally require additional information than what is currently required to bill under existing local codes. LEA providers may be allowed to re-submit claims for services that were billed as initial claims to receive adjustments in amounts originally paid. In a preliminary discussion with PSD regarding re-billing of claims, two potential re-billing alternatives, the claims inquiry form and erroneous payment correction, were identified. Additional discussions will be held with PSD after feedback from the Workgroup regarding the ability of providers to re-bill claims is received.

Action:

What: Send an e-mail to DHS to explain the impact on LEAs if new billing codes are not in place by the end of the fiscal year and request expedition of the SPA implementation process.

Who: Pam Wagner

When: ASAP

Action:

What: Prepare a summary of potential re-billing alternatives and a survey regarding the ability of providers to collect additional information required for re-billing and to re-submit claims.

Who: DHS and Navigant Consulting

When: Within a week of the Workgroup meeting

Action:

What: Provide feedback from the re-billing survey to Navigant Consulting.

Who: Workgroup

When: By the end of January

LEA Provider Manual Revisions

Navigant Consulting explained the proposed organization of the LEA-specific sections of the Provider Manual. General LEA Program information will be included in the first section ("loc edu") followed by eight separate sections for each service type (physical therapy, nursing, transportation, etc.). Billing-related information currently in "loc edu" and billing examples from "loc edu ex" will be combined into a new section. The last section will contain the chart that summarizes procedure codes and reimbursement rates for all LEA services ("loc edu cd").

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Feedback from the Workgroup regarding the preliminary draft of the “loc edu” section was summarized. Questions raised by the Workgroup will be researched and integrated, as appropriate, into the next draft. Revisions to the Provider Manual, which must be approved by PSD and EDS, are focused on re-organizing the topics, correcting erroneous information, and making changes to reflect the implementation of SPA 03-024. The Workgroup noted that the “Best Practices” manual which was published several years ago by the Los Angeles County Office of Education provided guidance to providers in language familiar to education personnel. They noted that this manual should be re-written by providers to reflect current practices and published by a party other than DHS. Potential additions to this manual include sample forms and information about federal privacy regulations.

Action:

What: Prepare and send an updated draft of the “loc edu” section to the Provider Manual Sub-workgroup.

Who: DHS and Navigant Consulting

When: After Workgroup feedback and additional research results are integrated into the “loc edu” section

Action:

What: Research if providers can be notified by e-mail whenever the LEA Program website is modified.

Who: DHS

When: Not Specified

Transportation

Navigant Consulting completed five field visits to discuss special education transportation costs and how these costs are recorded in the LEAs’ accounting systems. One outstanding field visit as well as follow-up conference calls are scheduled for January. During the field visits, LEAs expressed a preference for a cost per student day over a cost per student mile reimbursement methodology, which reduces the documentation required for billing purposes. Various methods of accounting for special education transportation were also identified. Since special education transportation costs between LEAs are so divergent, the feasibility of developing LEA-specific rates rather than a state-wide rate or rural/urban rates for transportation will be considered. LEA-specific rates could be developed using a transportation cost schedule that is similar to the one that providers will be required to submit at the end of each fiscal year for cost reconciliation purposes. However, CMS may not allow the state to develop LEA-specific rates for transportation, while using statewide rates for assessment and treatment services. In addition, LEA-specific rates may be more administratively burdensome for DHS to audit and administer. These issues will be discussed with CMS after the site visits and additional research on special education transportation is completed.

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Action:

What: Draft a cost schedule for special education transportation to be reviewed by the Transportation Sub-workgroup and other LEAs.

Who: Navigant Consulting

When: After the field visits and follow-up calls are completed

Potential New Services

The revised potential new services questionnaire was mailed to all LEA providers in November to identify services that are provided in school settings and the providers that render these services. Completed questionnaires were returned by 145 LEAs, with responses from a representative sample of small, medium, and large school districts and county offices of education. Personal care, behavioral aide, interpreter, speech therapy assistant, and physical therapy/occupational therapy assistant services were ranked the top five potential new services.

The questionnaire also asked providers to identify job titles of personal care practitioners. Results indicated that LEAs primarily use trained health care aides, licensed vocational nurses (LVNs), and registered nurses (RNs). A relatively high number of LEAs identified RNs, which raised the question as to why RNs are used to render personal care services when trained health care aides can provide services at a lower cost. The Workgroup noted that a student's health care needs may require the use of an RN, since trained health care aides cannot perform certain protocols even with supervision. Some LEAs may have also identified RNs as personal care practitioners, since they supervise LVNs and trained health care aides.

During two of the transportation field visits, Navigant Consulting also met with practitioners to discuss behavioral intervention services. A Behavioral Aide Questionnaire was developed and e-mailed to the Workgroup to solicit information about these services. Responses from the Workgroup will be used to test the effectiveness of the questionnaire prior to distribution to a larger group of LEAs.

Action:

What: Draft narratives of various scenarios that describe why RNs rather than trained health care aides are used to provide personal care services. Include descriptions of service levels, health care needs of students, and specific protocols, as appropriate.

Who: Workgroup

When: By the end of January

Action:

What: Complete and return the Behavioral Aide Questionnaire.

Who: Workgroup

When: ASAP

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Third Party Liability (TPL)

The Workgroup asked whether DHS would consider requesting a waiver of TPL requirements from CMS based on the Oklahoma decision. In a recent pilot study, LAUSD sent letters to the parents of 800 students requesting permission to bill their other health coverage. The administrative burden of complying with TPL requirements was demonstrated by the low response rate from these parents. DHS noted that third party liability was not an issue for Oklahoma, but only free care. The county's TCM SPA that was denied by CMS has issues with free care. DHS will wait to see how these issues are resolved before seeking a waiver from CMS for the LEA Program.

Action:

What: Send an e-mail describing the results of the TPL pilot study conducted by LAUSD to DHS.

Who: Pam Wagner

When: ASAP

Future Workgroup Meetings

The next Workgroup meeting for providers only will be held in Los Angeles on February 2nd. The next Workgroup meeting for DHS and providers will be held in Sacramento on March 2nd.